

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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In re Patent Application of:  
Christian Pacha et al.

Application No.: 10/598,811

Confirmation No.: 1611

Filed: September 12, 2006

Art Unit: N/A

For: PULSE-GENERATOR CIRCUIT AND  
CIRCUIT ARRANGEMENT

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Examiner: Not Yet Assigned

**REQUEST FOR REFUND**

MS PCT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Notification of Missing Requirements Under 35 U.S.C. 371 in the United States Designated/Elected Office applicant respectfully requests that the fees charged to deposit account 50-2215 (copy of statement and patent application fee determination record attached) be refunded as follows:

Chargeable claims 24 – 20 = 4 x \$50.00 = \$200.00

Multiple Dependent Claim Present = \$360.00

LESS – Response to Missing Requirements Submission of Fees Due

Surcharge of \$130.00 (late surcharge of declaration) = (\$130.00)

Chargeable claims 23 – 20 = 3 x \$50.00 = (\$150.00)

Independent claims 4 – 3 = 1 x \$200.00 = (\$200.00)

Refund requested in the amount of \$80.00 to be credited to our Deposit Account No. 50-2215. Applicant respectfully request the refund since the initial fees should not have been charged as the executed declaration/power of attorney did not accompany the application.

Dated: June 25, 2007

Respectfully submitted,

By R. L. M. G. B.

Laura C. Brutman  
Rensselaer, N.Y.

Registration No.: 38,395  
**DICKSTEIN SHAPIRO LLP**  
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Attorney for Applicant



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**Deposit Account Statement**

Requested Statement Month: May 2007  
Deposit Account Number: 502215  
Name: DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP  
Attention: PATRICIA DAVIS  
Street Address 1: 2101 L STREET NW  
Street Address 2:  
City: WASHINGTON  
State: DC  
Zip: 20037-1529  
Country: UNITED STATES

DATE SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
05/01 4	10598811	V0195.0095	1633	\$200.00	\$11,370.00
05/01 5	10598811	V0195.0095	1642	\$400.00	\$10,970.00
05/01 6	10598811	V0195.0095	1615	\$200.00	\$10,770.00
05/01 7	10598811	V0195.0095	1616	\$360.00	\$10,410.00
05/04 3	PAYMENT		9203	-\$2,390.00	\$12,800.00
05/04 1	10272981	E3879.0053/P053	1201	\$400.00	\$12,400.00
05/11 2	10580169	A0345.0025	1464	\$130.00	\$12,270.00
05/14 7	10599552	G0126.0250	2642	\$70.00	\$12,200.00
05/15 8	10598775	V0195.0093	1633	\$200.00	\$12,000.00
05/15 10	10598775	V0195.0093	1615	\$100.00	\$11,900.00
05/15 9	10598775	V0195.0093	1642	\$400.00	\$11,500.00
05/16 2	10491490	I1920.0066	1253	\$570.00	\$10,930.00
05/21 2	10815658	K2635.0078	1251	\$120.00	\$10,810.00
05/22 20008	60529832		8007	\$20.00	\$10,790.00
05/30 70	11634384	X2007.0228	1081	\$250.00	\$10,540.00
05/31 10	11797483	T2171.0251	1081	\$250.00	\$10,290.00
05/31 12664	60809715		8007	\$60.00	\$10,230.00

START BALANCE	SUM OF CHARGES	SUM OF REPLENISH	END BALANCE
\$11,570.00	\$3,730.00	\$2,390.00	\$10,230.00

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/598811

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

U.S. NATIONAL STAGE FEES	
BASIC FEE	
EXAMINATION FEE	
SEARCH FEE	
FEES FOR EXTRA SPEC. PGS.	minus 100 =
TOTAL CHARGEABLE CLAIMS	24 minus 20 =
INDEPENDENT CLAIMS	1 minus 3 =
MULTIPLE DEPENDENT CLAIM PRESENT	<input checked="" type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPEOR OTHER THAN  
SMALL ENTITY

RATE	FEES
BASIC FEE	
EXAM. FEE	
SEARCH FEE	
X \$ 125 =	
X \$ 25 =	
X \$ 100 =	
+ \$ 180 =	
TOTAL	

RATE	FEES
BASIC FEE	300
EXAM. FEE	200
SEARCH FEE	400
X \$ 250 =	
X \$ 50 =	200
X \$ 200 =	
+ \$ 360 =	360
TOTAL	1460

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus	**	=
Independent	*	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

SMALL ENTITY

OR OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X \$ 25 =	
X \$ 100 =	
+ \$ 180 =	
TOTAL ADDIT. FFF	

RATE	ADDI- TIONAL FEE
X \$ 50 =	
X \$ 200 =	
+ \$ 360 =	
TOTAL ADDIT. FFF	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus	**	=
Independent	*	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

RATE	ADDI- TIONAL FEE
X \$ 25 =	
X \$ 100 =	
+ \$ 180 =	
TOTAL ADDIT. FFF	

RATE	ADDI- TIONAL FEE
X \$ 50 =	
X \$ 200 =	
+ \$ 360 =	
TOTAL ADDIT. FFF	

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.